## S010-12-12-03-03-00050555

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)							
Wallack, Howard, , ,						10: h	2
(b) Address (number and street) 1360 Golden Way	☐ Check if address changed			2.70 a Holder bys	2.70anddate's FEC Identification Number		
(c) City, State, and ZIP Code		<del></del>		<u>-</u>	12 15 764	-	
Park City		UΤ	84060		3. Is Tris Statement	New	Amended
4. Party Affiliation	5. Office Sought	<del></del>			trict of Candicate	(N) OF	(A)
REPUBLICAN PARTY	House	•		UT	01		
DE	SIGNATION O	F PRINC	IPAL (	CAMPAIG	N COMMITTE	EE	
7. I hereby designate the following na							≭ion(s).
NOTE: This designation should be	filed with the appropri	ate office lis	sted in the	instructions.	(yea	r of election)	
(a) Name of Committee (in full)	·						
Wallack for Congres	SS						
(b) Address (number and street)				<del></del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
370 East South Temple, Ste	580						
(c) City, State, and ZIP Code		<del></del>					
Salt Lake City	•						
	•			UT	84111		
DE	SIGNATION OF	F OTHE	R AUTI	HORIZED ( Representative		S	
8. I hereby authorize the following par						-	
<ol><li>I hereby authorize the following nat candidacy.</li></ol>		is NOT my	principal	campaign com	imiπee, to receive a	and expend funds	on behalf of my
NOTE: This designation should be	en a robina a la cala					:	· : 
NOTE: This designation should be	filed with the principal	campaign c	eettimmo	•		-7	
(a) Name of Committee (in full)		<del></del>		<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	
(b) Address (number and street)		<del></del> -					•
(a) Findices (number and street)							
(c) City, State, and ZIP Code	<del></del>	<del></del>		<del></del>			<del></del>
: '						·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
						: 1	
I certify that I have exa	amined this Statement	and to the I	est of mu	knowledge en	al ballad is in an a		
Signature of Candidate				Knowledge an		отестапа сотрів	[6.
Wallack, Howard, , ,		$\sim$ 1			Date	*	
	$\Delta(a)$	كمكملم	-		12/10	1/2019	
						U BU	<u>; ; </u>
NOTE: Submission of false, erroneous	, or incomplete informa	ation may su	ubject the	person signing	this Statement to p	enalties of 2 U.S.	C §437g.
		1			<del></del>		<u></u>
			}				
	<del></del>			ii			

Page 1 of 1

ORIGIN ID:NPHA MIKE MCCAULEY

(385) 202-7284

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370 EAST SOUTH TEMPLE SUITE 580 SALT LAKE CITY, UT 84111 UNITED STATES US

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**WASHINGTON DC 20463**(800) 424-9530
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PO:



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**XC RDVA** 

20463



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Received from Electronic Filing Office	Date of Receipt
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(3/2015)	DATE PREPARED